## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

**CLAIMS AS FILED - PART I** 

Application or pocket Number

0403-14ARG.

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS					1COIC				 T	OR 7	<u> </u>	
<del></del>			w					RATE	FEE	┨ .	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			26 minus 20= 1		• 0			X\$ <sub>.</sub> 9=	0.	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =			0		X43=	0	OR	X86=	
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=	0	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in						column 2		TOTAL	385	OR	TOTAL	·
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u> </u>	-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+145=		OR	+290=	
TOTAL OR TOTAL OR ADDIT EEE												
ADDIT. FEEON ADDIT. FEE (Column 1) (Column 2) (Column 3)											•	
AMENDMENT B	CLAIMS			HIGHEST			] г		ADDI-	· [		ADDI-
		REMAINING AFTER AMENDMENT		NUME PRÉVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		= .	$\  \ $	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							_ L	TOTAL		OR ·	TOTAL	
ADDIT FEE												
	`	CLAIMS		HIGHE		(Column 3)	lr	·	400i			4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	lΓ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	╽┟	X43=			X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1		OR	/100-	
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.												
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **OF TOTAL ADDIT. FEE  **OF TOTAL ADDIT. FEE												
		ber Previously Pak					r foun	d in the app	repriate box	in colu	imn 1.	